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To:	Examining Division
Company:	Assistant Commissioner for Patents U.S. Patent and Trademark Office
Fax:	(703) 872-9306
From:	Terry C. Bartunek
Company:	Baxter International Inc. One Baxter Parkway, DF2-2E Deerfield, Illinois 60015
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Date:	May 20, 2004
Pages including this cover page:	13

Re: Copy of Response
 Veillon et al.
LUER TIP CAP HAVING REDUCED REMOVAL FORCE
 For Patent Application Serial No. 10/092,738
 Baxter Docket No. CLS-5794

Certificate of Facsimile Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Fax No. (703) 872-9306 on May 20, 2004.

By 
 Terry C. Bartunek

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MAR 15 2004

IN RE PATENT APP. OF BAXTER DEERFIELD
Veillon, et. al. Ser. No. 10/092,738
LUER TIP CAP HAVING REDUCED REMOVAL FORCE

Amendment Transmittal (in duplicate)

Petition and Fee for Extension of Time (37CFR1.136(a)) (in duplicate)

Amendment (including Claims & Remarks/Arguments)

Assistant Commissioner for Patents

Sir:

Please acknowledge receipt of the above identified documents by applying the Patent and Trademark Office receipt hereto and mailing this card.

Respectfully,
BAXTER INTERNATIONAL INC.

3/4/04 JCN



3.30.04
JCN

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Veillon et. al.)	
Serial No.:	10/092,738)	Group Art Unit: 3763
Filed:	March 7, 2002)	Examiner: Rodriguez
For:	LUER TIP CAP HAVING REDUCED REMOVAL FORCE)	I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22314, on this date. <i>March 4, 2007</i>
Atty. Docket No.:	CLS-5794)	Date <u>March 4, 2007</u> Jeffrey C. Nichols

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AMENDMENT TRANSMITTAL

Hon. Commissioner for Patents
Alexandria, VA 22313

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

(x) No additional fee is required.

Fee Calculation For Claims As Amended

	As Amended	Previously Paid For	Present Extra	Rate	Additional Fee
Total Claims	<u>24</u>	-	<u>34</u>	<u>0</u>	x \$ 18 =
Independent Claims	<u>4</u>	-	<u>6</u>	<u>0</u>	x \$ 86 =
Fee for Multiple Claims					\$0
				Total Additional Fee	\$0

Other: Petition for One Month Extension of Time

(x) Charge \$ 0 to Deposit Account No. 02-1440. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required to this application under C.F.R. §§ 1.16-1.17 or credit any overpayment to Deposit Account No. 02-1440. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

BAXTER INTERNATIONAL INC.

By 
Jeffrey C Nichols
Registration No.: 36,879

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